

**Name of Applicant**  
**Farm and Ranch Solid Waste  
Cleanup and Abatement  
Grant Application**

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Applicant: **Name Of Department Or Agency Applying For Grant**

Mailing Address: **Street Address**  
**City, CA Zipcode**

County: **Name of County**  
Primary Contact: **Name Of Contact Person, Title**  
Phone: **( )**  
Fax: **( )**

**Legislative Districts:**

Assembly District(s):

**(1)**  
**(2)**  
**(3)**

☐ **Proposed project Grant Request**  
☐ **Reimbursement Grant Request**

Senate District(s):

**(1)**  
**(2)**  
**(3)**

**Total Grant Request: \$0.00**

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**Certification:**

*I declare, under penalty of perjury, that all information submitted for the Board's consideration for allocation of grant funds is true and accurate to the best of my knowledge and belief.*

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Authorized Official's Signature

Title (Authorized in resolution)

**Name Of Authorized Official**

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Name

Date

## Introduction:

*(General Criteria (GC) #1A and #1B – Need)\** The California Integrated Waste Management Boards administers a Farm and Ranch Solid Waste Cleanup and Abatement Grant Program which allows cities and counties to seek financial assistance for the cleanup of illegal solid waste sites on farm or ranch property, such as **sites you are requesting be funded**.

**Your county** consists of **square miles** square miles **farmland/ranchland/vineyards/mountains**. These sparsely populated areas provide the perfect opportunity illegal dumping to occur. Abandoned appliances, tires, construction debris, as well as **other types of waste found** have been illegally dumped on **Number of Sites** site(s) in **Name Of Your County**. Illegally disposed appliances, tires and garbage present potential environmental and public health threats. Appliances offer the opportunity for heavy metals and CFC's to be released into the environment. Illegally dumped material quickly becomes a habitat for vector breeding, especially mice, rats and mosquitoes, which can spread diseases such as, encephalitis and Hantavirus pulmonary syndrome. Lastly, piles of disposed waste, which are left unaddressed, encourage additional and increased illegal dumping in the area.

**Add additional info if desired**

*( GC #2A – Objective)\** The main objective of the grant proposal is to remove solid waste from the sites mention below and restore the areas back to their original state. The health and environmental benefits of the proposals include immediate protection of nearby bodies of water from point source contamination, removal of vector habitat, removal of community blight and restoration of **type of land (farmland, etc.)**. Specific and measurable goals and objectives, along with the time frames are located in Exhibit E of this application package.

### Innovative Programs

*(Preference Criteria #2A – Innovative Programs)\** **provide information regarding the county's illegal dumping programs. this could include free roundup days, etc.**

#### **Funding Options (PC #11- Funding Options)\***

☐ To the best of our knowledge, there are no federal, state or local funds available to cleanup the site(s) presented in this application.

☐ The following federal, state and/ or local funds are available to cleanup the site(s) presented in this application:

- ◆
- ◆
- ◆

**Evaluation of the Project** (GC #4 – Evaluation)\*

The success of the project and determination of whether the objectives were accomplished will be evaluated by **Name Of The Person Overseeing The Project And Submitted The Final Report** , **Title Of Individual Named**. An inspection of the sites will be made to make sure all the tasks listed on the Work Plan, Exhibit F, are accomplished including:

- ◆ The sites are free of all solid waste and /or litter
- ◆ There is no attractive nuisance remaining at the site to propagate further dumping
- ◆ All potential threats to the public health and safety and the environment have been abated

Photos will be taken during and after the cleanup and / or abatement of the site, so they can document the work done and be compared to the photos presented in this application package to show success of program. **Name Of The Person Overseeing The Project And Submitted The Final Report** will write a final report as specified in the Grant Agreement summarizing the project activities and presenting the photos mention above.

**Grant Applicant Experience** (GC #6 – Completeness, Letters of Support, Experience)\*

**Summary of Grants Received by the Applicant**

<b>Date of Executed Grant Agreement</b>	<b>Grant Agreement Number</b>	<b>Grant Award Amount</b>	<b>Type of Grant</b>	<b>Percent of Project Completed</b>

**Provide any specific experience related to the above mentioned grant that futher describes your experience managing grants.**

## Site Information:

**Name Of Site (Site #)**

**Parcel Number**

SWIS #: **SWIS#, if applicable**

Location: **Address or location description of site**  
**ATTACHMENT B- Vicinity Map**

Zoned: **Zoning designation, including description of what the designation means**  
**ATTACHMENT C – Land Use / Zoning Designation Description**

Owned By: **Name Of Owner (Public Or Private)**

Mailing Address: **Street, City, State, Zip code**

### General Description of Site (History/Background):

#### Enforcement Status:

- ☐ No Enforcement Action has been taken.
- ☐ The following Enforcement Action has been taken:

Date	Enforcement Action

#### Owner Responsible: (PC #9 – Owner Responsibility)

It has been determined by the **Agency Applying For The Grant** that the property owner is not responsible for the illegal disposal of solid waste. The solid waste was illegal dumped from **name the public access**. The current property owners did not authorize solid waste disposal on their property. A signed affidavit from the property owner is located in Exhibit XXX.

Illegal disposal of **list most commonly dumped items** is common due to **explain the gap in service availability or current need**.

**SITE ASSESSMENT / ENVIRONMENTAL CONCERN /NEED FOR GRANT:**  
(GC #1C,D,E – Need, PC #7 - Public Health & Safety)\*

**Waste Characterization:**

<u>CYDs or Tons or %</u>	Household	<u>CYDs or Tons or %</u>	Household Hazardous
<u>CYDs or Tons or %</u>	Appliances	<u>CYDs or Tons or %</u>	Liquid
<u>CYDs or Tons or %</u>	Tires	<u>CYDs or Tons or %</u>	Burn Ash
<u>CYDs or Tons or %</u>	Automotive/metal	<u>CYDs or Tons or %</u>	Agricultural waste
<u>CYDs or Tons or %</u>	Industrial	<u>CYDs or Tons or %</u>	Other
<u>CYDs or Tons or %</u>	Construction/ Debris		

Dimensions of Disposal Area:               long X          wide X          high  
Approximate amount of waste:               CYDs

LAND USE	WITH IN 1000 FT OF THE WASTE	WITHIN 1 MILE OF THE WASTE
Rural residential: Density of 1 home per acre or less.	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Residential: Density of 2 homes per acre or more.	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Surface Water Bodies: (circle one) Lakes, rivers, streams seasonal and year around	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Water Supply Wells: (circle one) potable / nonpotable	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Environmentally Sensitive Area: (specify below)	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Planned Improvements:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

B. Soil Type (check appropriate soil type)

- ☐ Clay, silt, loam (low permeability)  
☐ Sand, pebble (medium permeability)  
☐ Gravel, cobble, (high permeability):

C. Mean annual precipitation (Yr. 24-Hr.(in))         

D. Estimated separation between waste and ground water (ft):

E. Is the waste area within a 100-year flood plain?

- ☐ YES  
☐ NO

## **Exhibit E Work Plan**

*(GC #2 – Objectives, GC #3A – Methodology)\*  
(PC #8 – Work Plan, PC 10 – Use of Funds)\**

### **Project Description/ Background**

#### **Scope of Work**

**Task # 1**



**Task # 2**



**Task # 3**



**Task # 4**



**Task # 5**



**Task # 6**



**Task # 7**



**Exhibit F**  
**Cost Estimates/ Budget**  
*(GC-3B,C,D – Methodology, GC #5 – Budget)\**  
*(PC # 10 – Use of Funds)\**

<b>Task #</b>	<b>Task Description</b> (Title as described in the Work Plan)	<b>Cost</b> (Cost per day or hour)	<b>Duration</b> (Number of hours or days task will take)	<b>Total Cost Of Task</b>	<b>Staff</b>
#1					